



Department of Purchasing and Contracting
NON-COMPETITIVE PROCUREMENT REQUEST FORM

RECEIVED
JUN 19 2018
Name: *[Signature]*

Requesting Department: Watershed Management
Department Contact Person: Colin J Decker Telephone: 770 808 2913
Email: cjdecker@dekalbcountyga.gov

Requisition Number: _____ Suggested Supplier: Smith & Loveless, Inc
Estimated Amount of Purchase: \$ 600,000.00
Detailed Description of the Goods or Services to be purchased: Request for Renewing CPA #102220 for the Smith & lov. proprietary pumping stations & spare parts.

Emergency (For Emergency Requests, Please check this box and answer all questions below.)

1. Date and Time of Emergency Occurrence: _____

2. Please state the nature of the emergency posing a risk to public health, welfare, safety or resources:

3. State how the Estimated Amount was determined to be Fair and Reasonable (attach supporting documentation):

Sole Source (Please check box and answer all of the following completely.)

1. Provide an explanation why the product, service or supplier requested is the only method that can satisfy the requirements. Please explain why alternatives are unacceptable. Be specific with regard to specification, features, characteristics, requirements, capabilities and compatibility. (Attach additional documents, if necessary):

In DeKalb County have more than 60 plus Smith & Loveless pumping station for the sanitary sewer handling in all over DeKalb. This is the request for an anticipated amount of \$600000.00 for the 2019 budget for station upgrade and exclusive parts up on the Consent Decree.

2. Will this purchase obligate us to a particular vendor for future purchases? (Either in terms of maintenance that only this vendor will be able to perform and/or if we purchase this item, will we need more "like" items in the future to match this one?) Explain in detail.

Yes, As long as we keep this custom built pump stations of each locations at DeKalb.

3. Explain the impact to the County or Public if this request is not approved.

These replacement of pumping stations as per the CONSENT DECREE up on the age and condition of current low performed stations. This will reduce the risk to avoid sewer spill in the populated increasing sewer flow system. Also sewer spill affect the public health and water resources.

I hereby request that this non-competitive procurement request be approved for the purchase of the above stated work, material, equipment, commodity, or service.

Department Director (Typed/Printed Name) Reginald Wells

Signature: *[Signature]*

Date: 6/22/18

Do Not Write Below – for the Department of Purchasing and Contracting Use Only

Procurement Agent (Typed/Printed Name) Randy Wells

Signature: *[Signature]*

Date: 07/18/2018

Procurement Manager (Typed/Printed Name) Cathryn Horner

Signature: *[Signature]*

Date: 7/27/18

Approved Not Approved

Signature: Zach. Cleave, Director, Department of Purchasing and Contracting

Date: 7/27/18

P&C Rev. 9/21/2017

Prepare agenda item for 8/28/18 BOC meeting.

Print Form